

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P15684**

1. Entity Name

**BURLINGTON INDUSTRIES, INC.****FILED**  
**Mar 19, 2001 8:00 am**  
**Secretary of State**

03-19-2001 90445 017 \*\*\*150.00

Principal Place of Business

**3330 W. FRIENDLY AVE.  
P.O. BOX 21207, TAX DEPT.  
GREENSBORO NC 27420**

Mailing Address

**3330 W. FRIENDLY AVE.  
P.O. BOX 21207, TAX DEPT.  
GREENSBORO NC 27420**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number **56-1584586**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VCFO** ☐ Delete  
NAME **PETERS, CHARLIE E JR**  
STREET ADDRESS **26 LOCH RIDGE DR**  
CITY-ST-ZIP **GREENBORO NC 27408**TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE **CEOC** ☐ Delete  
NAME **HENDERSON, GEORGE W. III**  
STREET ADDRESS **603 WOODLAND DR**  
CITY-ST-ZIP **GREENSBORO NC 27408**TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE **GV** ☒ Delete  
NAME **WALDREP, GEORGE C**  
STREET ADDRESS **7230 STRAWBERRY RD.**  
CITY-ST-ZIP **SUMMERFIELD NC**TITLE **PRESIDENT AND COO** ☐ Change ☒ Addition  
NAME **DOUGLAS J MCGREGOR**  
STREET ADDRESS **6 COUNTRY LANE**  
CITY-ST-ZIP **PEPPER PIKE, OHIO 44124**TITLE **VPT** ☐ Delete  
NAME **MCCLUSKY, KARYL P**  
STREET ADDRESS **3809 BLAIRWOOD ST**  
CITY-ST-ZIP **HIGH POINT NC 27265**TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE **S** ☒ Delete  
NAME **GROGAN, ALICE W**  
STREET ADDRESS **6303 SPYGLASS CT**  
CITY-ST-ZIP **GREENSBORO NC 27410**TITLE **ASSISTANT SECRETARY** ☐ Change ☒ Addition  
NAME **RUSSELL M ROBINSON III**  
STREET ADDRESS **715 BLAIR STREET**  
CITY-ST-ZIP **GREENSBORO, NC 27408**TITLE **V** ☐ Delete  
NAME **ENGLAR, JOHN D**  
STREET ADDRESS **215 N RIDGEWAY DR**  
CITY-ST-ZIP **GREENSBORO NC 27403**TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Karyl P McClusky

Karyl P. McClusky

3/15/01 (336) 379-2203

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Attachment  
PL 5084

TRANSMITTAL ADVICE

March 15, 2001

5/5285

**TO** Division of Corporations  
Uniform Business Report  
Post Office Box 1500  
Tallahassee, Florida 32302-1500

**FROM** Burlington Industries, Inc.  
Tax Department  
Post Office Box 21207  
3330 West Friendly Avenue  
Greensboro, North Carolina 27420

**ENCLOSURES:**

FEIN 56-1584586

ATTACHED COPY

1. Corporation Annual Report 2001.
2. Remittance of \$150 in payment of the filing fee.

**ACKNOWLEDGEMENT:**

Please acknowledge receipt of the enclosure by making an appropriate notation on the enclosed copy of this transmittal advice and return it in the envelope provided.

Very truly yours,



Larry Starling  
Tax Department

Via Certified Mail

Attachment  
PB 684

TRANSMITTAL ADVICE

515285

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